DECLARATION AND POWER OF ATTORNEY UNDER RULE 63 (37 C.F.R.)

FOR PATENT APPLICATION IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

(Form F r Utility/Design/CIP/PCT National/Plant/Original/Substitute/ Supplemental Declarati ns)

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name, and I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the **INVENTION ENTITLED**: the specification of which (CHECK applicable BOX(ES)) A. X is attached hereto X as U.S. Application No. ____/_ B. D was filed on BOX(ES) C.

was filed as PCT International Application No. PCT __/____/ and (if applicable to U.S. or PCT application) was amended on I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose all information known to me to be material to patentability as defined in 37 C.F.R. 1.56. Except as noted below, I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365 (b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International Application which designated at least one other country than the United States, listed below and have also identified below any foreign application for patent or inventor's certificate, or PCT International Application, filed by me or my assignee disclosing the subject matter claimed in this application and having a filing date (1) before that of the application on which priority is claimed, or (2) if no priority claimed, before the filing date of this application: **Date First Published Date Patented** PRIOR FOREIGN APPLICATION(S) **Priority NOT claimed** Day/MONTH/Year Filed or Granted Number Country or Laid-Open BO2003A000080 **ITALY** 20 /FEBRUARY/2003 If more prior foreign applications, X at bottom and continue on attached page. Except as noted below, I hereby claim domestic priority benefit under 35 U.S.C. 119(e) or 120 and/or 365(c) of the indicated United States application(s) listed below and PCT International Application(s) listed above or below and, if this is a continuation-in-part (CIP) application, insofar as the subject matter disclosed and claimed in the application is in addition to that disclosed in such prior application(s), I acknowledge the duty to disclose all information known to be to be material to patentability as defined in 37 C.F.R. 1.56 which became available between the filing date of each such prior application and the national or PCT International filing date of this application: PRIOR U.S. PROVISIONAL, NONPROVISIONAL AND/OR PCT APPLICATION(S) **Status Priority NOT claimed** Application No. (series code/serial no.) Day/MONTH/Year Filed pending, abandoned, patented I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statement were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the Untied States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. And I hereby appoint The Law Offices of Timothy J. Klima, One Massachusetts Avenue NW, Suite 330, Washington, DC 20001 (to whom all communications are to be directed), and the below named person(s) (of the same address) individually and collectively my attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith and with the resulting patent, and I hereby authorize them to delete names/numbers below of persons no longer with the Firm and to act and rely on instructions from and communicate directly with the person/assignee/attorney/firm/organization who/which first sends/sent this case to them and by whom/which I hereby declare that I have consented after full disclosure to be represented unless/until I instruct the above Firm and/or below attorney in writing to the contrary. Timothy J. Klima $DATE: \mathbf{X}$ January 21, 2004 (1) INVENTOR'S SIGNATURE: X _____ Middle Initial Family DALL'OSSO Name: First Davide State/Foreign Country _____ ITALY_____ Residence: City BOLOGNA Country of Citizenship: ITALY Mailing Address: Via Mascagni, 7, 40141 BOLOGNA - ITALY_ (including postal code) DATE: X January 21, 2004 (2) INVENTOR'S SIGNATURE: X Middle Initial _____ Family ____SARTONI ____ Name: First Massimo Residence: City____BOLOGNA_ State/Foreign Country_____ITALY____ Country of Citizenship: ____ITALY___ Mailing Address: Via Leandro Alberti, 79 – 40139 BOLOGNA – ITALY______ (including postal code) "X" box IN FOR ADDITIONAL INVENTORS, and proceed on the attached page to list each additional inventor.

Attorney Docket No.

DECLARATION AND POWER OF ATTORNEY

(Continued) ADDITIONAL INVENTORS AND/OR FOREIGN PRIORITIES

(3) INVENTOR'S SIGNATURE: \mathbf{X}	Fromen of		DATE: X Jan	uary 21, 2004
Name: FirstFiorenzo	, , , , , , , , , , , , , , , , , , ,	1	_DRAGHETTI	
Residence: CityMEDICINA		State/Foreign	CountryITAL	Y
Country of Citizenship:ITALY				
Mailing Address:Via San Doning (including postal code)	o, 506 – 40059 MEDICINA	- ITALY		
(4) INVENTOR'S SIGNATURE: ${f X}$				
Name: First				
Residence: City	State/Foreign Country			
Country of Citizenship:				
Mailing Address: (including postal code)				
(5) INVENTOR'S SIGNATURE: ${f X}_{}$			DATE: X	
Name: First	Middle Initial	Family_		
Residence: City				
Country of Citizenship:		_		
Mailing Address: (including postal code)				
(6) INVENTOR'S SIGNATURE: ${f X}$			DATE: X	
Name: First	Middle Initial	Family_		-
Residence: City	State/Foreign Country			
Country of Citizenship:				
Mailing Address:(including postal code)	,			
(7) INVENTOR'S SIGNATURE: \mathbf{X}			DATE: X	
Name: First				
Residence: City	Sta	ate/Foreign Country		
Country of Citizenship:		_		
Mailing Address:(including postal code)				
(8) INVENTOR'S SIGNATURE: \mathbf{X}_{-}		<u>-</u>	DATE: X	
Name: First				
Residence: City				
Country of Citizenship:				
Mailing Address:(including postal code)				
PRIOR FOREIGN APPLICATIONS (Con Number Country	tinued) Day/MONTH/Year Filed	Date First Published or Laid-Open	Date Patented or Granted	Priority NOT claimed